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**United States Bankruptcy Court**  
of the  
**Northern District Of Illinois**  
**Western Division**

## Trustee's Final Report

In Re: GARY W. GERBER  
1631 MONTAGUE ROAD  
ROCKFORD, IL 61102

SSN-xxx-xx-2422

Case Number: 04-72749

Case filed on: 5/25/2004  
Plan Confirmed on: 8/6/2004

D Dismissed

Total funds received and disbursed pursuant to the plan: \$19,830.00

Detail of Disbursements below:

Claim #	Name of the Claimant	Claimed by the Creditor	Allowed by the Court	Principal Paid	Interest Paid
772	CLERK OF U.S. BANKRUPTCY COURT	164.00	164.00	164.00	0.00
	Total Administration	164.00	164.00	164.00	0.00
000	BRIAN A. HART	2,700.00	2,700.00	2,700.00	0.00
	Total Legal	2,700.00	2,700.00	2,700.00	0.00
999	GARY W. GERBER	0.00	0.00	0.00	0.00
	Total Debtor Refund	0.00	0.00	0.00	0.00
001	ANATOLY M. ROZMAN, MD	88.00	88.00	13.19	0.00
002	CAMELOT RADIOLOGY	0.00	0.00	0.00	0.00
003	CAPITAL ONE	1,888.60	1,888.60	283.08	0.00
004	B-FIRST LLC	8,729.96	8,729.96	1,308.51	0.00
005	DISCOVER FINANCIAL SERVICES	8,845.12	8,845.12	1,325.78	0.00
006	JOHN BUTLER MC SC	1,828.00	1,828.00	273.99	0.00
007	KARLA J. HEGDE LCPC	0.00	0.00	0.00	0.00
008	MARENGO RESCUE SQUAD	0.00	0.00	0.00	0.00
009	ECAST SETTLEMENT CORPORATION	9,180.29	9,180.29	1,376.01	0.00
010	OSF LIFELINE AMBULANCE	0.00	0.00	0.00	0.00
011	OSF COMMON BUSINESS OFFICE	0.00	0.00	0.00	0.00
012	OSF SAINT ANTHONY MEDICAL CENTER	60,455.98	60,455.98	9,061.63	0.00
013	QUEST DIAGNOSTICS INCORPORATED	0.00	0.00	0.00	0.00
014	REGINA BIELKUS, MD	0.00	0.00	0.00	0.00
015	REHABILITATION ASSOC. OF ROCKFORD	0.00	0.00	0.00	0.00
016	ROCKFORD HEALTH SYSTEMS/	1,992.20	1,992.20	298.61	0.00
017	ROCKFORD HEALTH SYSTEMS/	0.00	0.00	0.00	0.00
018	ROCKFORD ORTHOPEDIC ASSOCIATES	0.00	0.00	0.00	0.00
019	ROCKFORD ORTHOPEDICS APPLIANCE	0.00	0.00	0.00	0.00
020	ROCKFORD RADIOLOGY	0.00	0.00	0.00	0.00
021	ROCKFORD REHAB MEDICINE	0.00	0.00	0.00	0.00
022	MEDICAL DENTAL HOSPITAL BUREAU	232.00	232.00	34.77	0.00
023	ATTORNEY TERRY HOSS &	150.00	150.00	22.49	0.00
024	B-FIRST LLC	10,726.04	10,726.04	1,607.71	0.00
	Total Unsecured	104,116.19	104,116.19	15,605.77	0.00
	Grand Total:	106,980.19	106,980.19	18,469.77	0.00

Total Paid Claimant: \$18,469.77  
Trustee Allowance: \$1,360.23  
Percent Paid Unsecured: 14.99

Wherefore, your petitioner prays that a final Decree be entered discharging the trustee and the trustee's surety from any and all liability on account of the within proceedings, and closing the estate, and for such other relief as is just. Pursuant to FRBP, I hereby certify that the subject case has been fully administered.

Report Dated:

/s/ Lydia S. Meyer  
Lydia S. Meyer, Trustee

This is to certify that a copy of this notice has been mailed to the debtor and the debtor's attorney.

Dated at Rockford, IL on 05/14/2008

By /s/Heather M. Fagan